Under the Paperwork R	Reduction Act of 1995	5. no person are required to	U.S. Patent a	nd Trademar	ed for use through 0 rk Office; U.S. DEP	6/30/2010. O ARTMENT OF	COMMERCE
*	respond to a collection of information unless it displays a valid OMB control number Complete if Known						
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Number 10		0/577,444-Conf. #3437		
FEE TRANSMITTAL			Filing Date A		April 27, 2006		
· · · · · · · · · · · · · · · · · · ·			First Named Inventor J		lean-Philippe HOULMONT		
For FY 2009			Examiner Name E		. Olson		
Applicant claims s	Art Unit 16		623				
TOTAL AMOUNT OF PAYMENT (\$) 540.00			Attorney Docket No. 34		493-0165PUS1		
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify): x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17							
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
,	FILIN	G FEES SE Small Entity	Small Entity		ATION FEES Small Entity	F D	- :- d (fb)
Application Type Utility	<u>Fee (\$)</u> 330	Fee (\$) Fee (\$	<u>Fee (\$)</u> 270	Fee (\$) 220	<u>Fee (\$)</u> 110	Fees Pa	11G (\$)
Design	220	110 100	50		-		
Plant	220			140	70		
		110 330	165	170	85		
Reissue	330	165 540	270	650	325		
Provisional	220	110 0	0	0	0 _		
2. EXCESS CLAIM FEE Fee Description Each claim over 20 (inc						Fee (\$) 52	Fee (\$)
Each independent claim				220	110		
Multiple dependent claims						390	195
Total Claims 14 - 23 or HP HP = highest number of total	- 23 or HP				flultiple Dependent Claims ee (\$) Fee Paid (\$)		
Indep. Claims	ms Extra Claims Fee (\$) Fee Paid (\$)						-
	x pendent claims paid	for, if greater than 3.					
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
100 = /50 = (round up to a whole number) x =							
4. OTHER FEE(S) Fees Paid (\$)							
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1401 Notice of appeal 540.00							
SUBMITTED BY Signature \$\mathref{H}\$ \$\mathref{Y}\$ \$\mathref{H}\$ \$\mathref{H}\$ \$\mathref{S}\$\$, 256 Registration No. (Attraceut/Accept) 40,069 Telephone (703) 205-8000							
La (Automey/Agent)					Telephone (703) 205-8000		
Name (Print/Type) MaryA	Date September 14, 2009						